PROCESSED

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THOMSON REVIERS

# UNITED STATES 14374 SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB NUMBER:	3235-0076						
Expires:	May 31, 2008						
Estimated average	burden						
hours per response	16.00						

	SEC USE ONL	Y
Prefix		Serial
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	Date Received	
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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Offer and Sale of Units of Limited Liability Company Interest in Connection with Acquisition
Filing Under (Check box(es) that apply):
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer ( Check if this is an amendment and name has changed, and indicate change.)  Taylored Services Holdings, LLC
Address of Executive Offices (Number and Street, City, State, Zip Code)  Telephone Num  08049498
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)
Brief Description of Business  SEC Mail Processing Section
Provide wharehousing, supply chain and transportation outsourced services.  MAY 0 72008
Type of Business Organization  corporation business trust  limited partnership, already formed business trust  limited partnership, to be formed  limited liability company  washington, DC limited liability company
Actual or Estimated Date of Incorporation or Organization:  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)  Estimated  D E
GENERAL INSTRUCTIONS
Federal:
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, fireceived at that address after the date on which it is due, on the date it was mailed by United States registered or certified mil to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fothe exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of eqity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer □ Director General and/or Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Patton, Ted Business or Residence Address (Number and Street, City, State, Zip Code) 179 Bear Hill Road, Waltham, MA 02451 Beneficial Owner Executive Officer Director ☐ General and/or Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) MacRae, Bruce (Number and Street, City, State, Zip Code) **Business or Residence Address** 179 Bear Hill Road, Waltham, MA 02451 Beneficial Owner Check Box(es) that Apply: ☐ Promoter Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Taylored Services West, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 231 Mill Road, Edison, NJ 08837 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Taylored Services, Inc. **Business or Residence Address** (Number and Street, City, State, Zip Code) 231 Mill Road, Edison, NJ 08837 Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner □ Executive Officer Managing Partner Full Name (Last name first, if individual) **Taylored Acquisition Corporation** Business or Residence Address (Number and Street, City, State, Zip Code) 179 Bear Hill Road, Waltham, MA 02451 Check Box(es) that Apply: Beneficial Owner Executive Officer □ Director General and/or ☐ Promoter Managing Partner Full Name (Last name first, if individual) Taylor, Mark Business or Residence Address (Number and Street, City, State, Zip Code) 231 Mill Road, Edison, NJ 08837 Promoter ☐ Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code)

			-	B. INF	ORMATIC	N ABOU	r offeri	NG				
1. Has the is	ssuer sold,	or does the i	ssuer inten	d to sell, to	nonaccredi	ted investo	rs in this of	ffering?			Yes	No ⊠
			Ans	wer also in	Appendix,	Column 2,	if filing un	der ULOE.				
2. What is the	he minimu	m investmen	it that will b	e accepted	from any is	ndividual?.			******************		\$_N/A_	
											Yes	No
3. Does the											$\boxtimes$	
If a person or states, a broker of	on or simil n to be list list the nan or dealer, y	ar remuneral ed is an asso ne of the bro ou may set f	tion for soli ciated perso ker or deale orth the inf	citation of on or agent er. If more	purchasers i of a broker than five (5	in connecti or dealer r ) persons to	on with sale egistered w o be listed a	es of securi ith the SEC	ties in the o and/or wit	ffering. h a state		
Full Name (I	Last name	first, if indiv	idual)									
Business or	Residence	Address (Nu	mber and S	treet, City,	State, Zip (	Code)						
Name of Ass	sociated Br	roker or Deal	ler							<del></del>		
States in Wh					Solicit Pure	chasers			<del></del>	<u>,</u>		
•		or check inc		,				(DC)			_	All States [ID]
(AL) (IL)	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)
Business or Name of Ass				Street, City,	State, Zip	Code)						
States in Wh		Listed Has or check inc										All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (I	Last name	first, if indiv	idual)									
Business or	Residence	Address (Nu	imber and S	treet, City,	State, Zip	Code)			·			
Name of Ass	sociated Br	roker or Deal	ler						······	<u></u>		
States in Wh		Listed Has or check inc			Solicit Purc	hasers					r	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[iD]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

a	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchangeoffering, theck this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
_	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	•	\$
	Equity		\$ \$_13,333,333
	Equity	\$ <u>12,522</u>	Ф <u>13,333,333</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	<b>\$</b>	\$
	Other (Specify)	\$	\$
	Total	\$ <u>13,333,333</u>	\$ <u>13,333,333</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
t	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings underRule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amour of Purchases
	Accredited Investors	3	\$ <u>13,333,333</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		<b>3</b>
S	If this filing is for an offering under Rule 504 or 505, enter the information requested for all sœurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C- Question 1.		
	Type of offering	Type of	Dollar Amoun
	Rule 505	Security	Sold · \$
	Regulation A		\$
	Rule 504	***	\$
	Total		\$
4. :	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		□ \$
	Printing and Engraving Costs		<b>\$</b>
	Legal Fees		<b>∑</b> \$ <u>120,000</u>
	Accounting Fees	1	□ <b>\$</b>
	Engineering Fees		□ <b>\$</b>
	Sales Commissions (specify finders' fees separately)		□ s
	Other Expenses (identify) Blue Sky Filing Fees (MA, NJ)		<b>⊠</b> \$ 1,000
	Total		<b>■ \$</b> 121,000

	C. OFFERING PRICE	<u>, NUMBER OF INVESTORS, EXPENSES AND USE O</u>	F PI	ROCEEDS	
5. In us	I and total expenses furnished in respons "adjusted gross proceeds to the issuer." dicate below the amount of the adjusted g ed for each of the purposes shown. If the imate and check the box to the left of the	te offering price given in response to Part C- Question e to Part C- Question 4.a. This difference is the ross proceeds to the issuer used or proposed to be amount for anypurpose is not known, furnish an estimate. The total of the payments listed must equal forth in response to Part C- Question 4.b above.			\$ <u>13,212,333</u>
				Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees			\$	□ \$
	Purchase of real estate			\$	□ \$
	Purchase, rental or leasing and installati	on of machinery and equipment		\$	□ \$
	Construction or leasing of plant building	gs and facilities		\$	□ \$
	offering that may be used in exchange f	ng the value of securities involved in this or the assets or securities of another		\$	<b>S</b>
	-			<b>\$</b>	□ <b>\$</b>
				\$	<b>⊠</b> \$ <u>13,212,333</u>
	Other (specify):	Marriena		\$	□ \$
	Column Totals			\$	<b>S</b> \$ 13,212,333
	Total Payments Listed (column totals ac	ided)		⊠ \$⊥	3,212,333
		D, FEDERAL SIGNATURE			
fo	lowing signature constitutes an undertaki	e signed by the undersigned duly authorized person. If the ng by the issuer to furnish to the U.S. Securities and Excha issuer to any non-accredited investor pursuant to paragraph	nge (	Commission, u	pon written request
Issue	r (Print or Type)	Signature		Date	
Taylo	ored Services Holdings, LLC	Tool Path		May 6, 200	8
Nam	e of Signer (Print or Type)	Title of Signer (Print or Type)			
Ted I	atton	Treasurer			

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGN	ATURE		
Is any party described in 17 CFR 230     of such rule?			Yes	No
	See Appendix, Column 5,	for state response.		
<ol><li>The undersigned issuer hereby undertageners. Form D (17 CFR 239,500) at such tire.</li></ol>		trator of any state in which this notice is filed	la notice on	
<ol><li>The undersigned issuer hereby undersissuer to offerees.</li></ol>	kes to furnish to the state administ	rators, upon written request, information furn	ibed by the	
	of the state in which this notice is f	itions that must be satisfied to be entitled to to liled and understands that the issuer claiming we been satisfied.		
The issuer has read this notification and landersigned duly authorized person.	nows the contents to be true and ha	as duly caused this notice to be signed on its	<b>b</b> half by the	
Issuer (Print or Type)	Signature	Date		
Taylored Services Holdings, LLC	Ted fall	May <b>6</b> ,	2008	
Name of Signer (Print or Type)	Title of Signer (Print or Type	pe)		

Treasurer

## Instruction

Ted Patton

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of very notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signtwees.

# APPENDIX

1	Intend to sell to non-accredited investors in State		Type of security and aggregate offering price		Type of inv amount purch (Part C-	vestor and ased in State	,	5 Disqualifi under State (if yes, a explanati	ULOE ttach ion of
		rs in State B-Item 1	offered in state (Part C Item 1)					waiver gr (Part E-It	anted) em 1)
State	Yes	No	Units of Limited Liability Company Interest	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									<del> </del>
AK									
AZ									
AR									
CA									
CO									
CT									
DE									
DC									i
FL									
GA	<u>.</u>								
HI									
ID									<u></u>
IL									
IN									ļ
IA									
KS									
KY									
LA	<b>.</b>	,							
ME									
MD			#10.000 and		00.000.000		•		
MA	ļ	X	\$13,333,333	1	\$8,000,000	0	\$0		Х
MI									
MN	ļ								
MS	<u>l</u>		<u> </u>			l			

## APPENDIX

]	to non-	2 d to sell accredited rs in State B-Item 1 3 Type of security and aggregate offered in state (Part C Item 1) 4 Type of investor and amount purchased in State (Part C-Item 2)						5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Units of Limited Liability Company Interest	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО		ļ								
MT										
NE										
NV										
NH								· <del></del>		
NJ		Х	\$13,333,333	2	\$5,333,333	0	\$0		Х	
NM										
NY		<u></u>								
NC						,				
ND										
ОН								****		
OK										
OR										
PA										
RI										
SC										
SD										
TN										
TX					<del></del>					
UT										
VT										
VA										
WA										
WV										
WI										

				Ã	PPENDIX					
1 2			3 Type of			5 Disqualification under State ULOE				
(Part B-Item 1			security and aggregate offering price offered in state (Part C Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				(if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Units of Limited Liability Company Interest	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										
Intern'i.										

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